INVOICE # DATE: | SOLD TO: || SHIPPING/ORDER INFO: | | Name | Address St Zip | City | | || Phone | TRANSACTION REPORT: PO# | Salesperson: | | | Cash | | Check | | Other | | Tax Exempt | Qty |Code| Item No. | Description | Unit | Total |

	Sheet1
·+++	+
	+ Non-Taxable
TERMS:	Labor
	Merchandise
	Shipping
	Sales Tax
THANK YOU FOR YOUR	R BUSINESS! Discount
	++
	Total
	Payments
·	+ ++

| Cash Register and Inventory System, Pg. # | | PLEASE PAY >>> \$\$|